INFECTION CONTROL

A. POLICY STATEMENT

The actual or possible exposure to communicable diseases can have a significant emotional and/or physical impact on our employees. The department stresses that each employee should take advantage of all available safe guards when the possibility of exposure to another person’s bodily fluids exists. The department is committed to providing its employees with the training and safety protection that is necessary to protect their selves from possible exposure. If an employee does come in contact with the bodily fluids or airborne pathogens of a person who may be infected with a communicable disease, the department is committed to ensuring they are provided with the appropriate medical care and counseling.

B. PURPOSE

1. To establish exposure determination and to identify safe work practices to minimize potential exposures.

2. To establish a training schedule and implementation of the exposure control plan and procedures for the evaluation of circumstances surrounding exposure incidents.

3. These guidelines also set forth the procedures to follow for infectious waste decontamination, storage and disposal.

C. EXPOSURE WORK PRACTICES AND PROCEDURES

1. The following guidelines should be considered when employees are in contact with a person or environment suspected of having or containing a communicable disease.

   .1 Universal precautions shall be utilized to prevent contact with blood or other potentially infectious materials. Universal precautions is an approach by which all human blood and body fluids are treated as if known to be infectious. Under circumstances in which differentiation between body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious materials.

2. Engineering and work practice controls are controls that isolate or remove the communicable disease source from the workplace or reduce the likelihood of exposure by altering the manner in which a task is performed.

   .1 Engineering controls shall be examined and maintained or replaced as needed to ensure their effectiveness.
.2 The City of Concord shall provide handwashing facilities and antiseptic hand cleaners or antiseptic
towelettes which are readily accessible to all employees.

.3 Employees shall wash their hands and other skin with soap and water, or flush mucous membranes
with water immediately or as soon as practical following contact with potentially infectious
materials and after the removal of gloves or other PPE.

.4 Contaminated needles or other sharps shall not be bent, recapped, or removed unless no alternative
is feasible. Such recapping or needle removal must be accomplished through a one-handed
technique.

.5 All sharps shall be placed in appropriately marked Sharps containers which are puncture resistant,
leak proof and labeled.

. 01 All Sharps containers shall be easily accessible, replaced routinely and not allowed to
overflow. All full containers shall have a secured lid or mechanism to prevent spillage.

.02 Property Room and Jail Staff members are responsible for monitoring the accumulation of
infectious waste receptacles and arrangements for disposal at an approved facility or the
contracted environmental services agency.

.03 At no time shall a used or full Sharps container be cleaned or re-used.

.6 Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lens are prohibited
in work areas where there is a reasonable likelihood of occupational exposure.

.7 Food and drink shall not be kept in refrigerators, freezers, shelves, cabinets or on counter tops
where potentially infectious materials are present.

.8 All procedures involving infectious materials shall be performed in such a manner as to minimize
splashing, spraying, spattering and generation of droplets of these substances.

.9 Specimens of blood or other potentially infectious materials shall be placed in a container, which
prevents leakage during collection, handling, processing, storage, transport, or shipping.

.01 The container for storage, transport or shipping shall be labeled and closed prior to being
stored transported or shipped.

.02 If outside contamination of the primary container occurs; the primary container shall be
placed within a second container of the same nature.

3. PPE is specialized clothing or equipment worn by an employee for protection against a hazard. General
work clothes are intended to function as protection against a hazard unless other personal protective
clothing is provided.

.1 When there is potential for an occupational exposure, The City of Concord shall provide, at no cost
to the employee, appropriate PPE which act as a barrier between the source and the employee.

.2 Employees shall use PPE unless under rare and extraordinary circumstances, it was the employee’s
professional judgment that in the specific instance its use would have prevented the delivery of
public safety or would have posed an increased hazard to the safety of the employee(s) or the public.

.3 The City of Concord shall clean, launder, and dispose of PPE at no cost to the employee.
The City of Concord shall repair or replace PPE as needed to maintain its effectiveness, at no cost to the employee.

All PPE shall be removed prior to leaving the work area.

If a garment is penetrated by potentially infectious materials, the garment shall be removed immediately or as soon as practical and it shall be placed in an appropriately designated area or container for storage, washing, decontamination or disposal.

D. DISINFECTING, DECONTAMINATION AND DISPOSAL OF INFECTIOUS WASTE PROCEDURES

1. All equipment, environments and working surfaces shall be cleaned and decontaminated and/or disposed of after contact with potentially infectious materials.

   .1 Employees shall wear appropriate PPE when cleaning contaminated areas or handling contaminated equipment and use disinfectant agents that are supplied by the city.

   .2 Any contaminated work surface or equipment that cannot be safely decontaminated by an employee shall be taken out of service until decontamination is completed by the authorized contract company.

   .3 A supply of disinfectant will be maintained in the department jail, property room, evidence room and CSI Bureau.

2. All First Aid supplies are intended as a single use item and therefore shall be considered a disposable device.

3. Items of evidence that may be contaminated shall be packaged pursuant to the CPD Property Manual. All items shall be clearly identified as a health hazard on the package.

4. Handling, storage, treatment and disposal of all regulated waste shall be in accordance with Health and Safety Codes and other applicable Federal, State and local regulations.

   .1 The infectious waste receptacles shall be kept in the jail sally port and booking area, the Evidence Room and Community Service Desk.

   .2 The approved receptacles are to be clearly marked "Infectious Waste" and contain the required red plastic liner also marked "Infectious Waste".

E. VACCINATION AND PREVENTION

1. The City of Concord shall make available the Hepatitis B vaccine to all employees who have the potential for occupational exposure in compliance with CAL OSHA regulations. Post-exposure medical evaluation and follow up care shall be available to all employees who have had an exposure.

   .1 All Hepatitis B vaccines, post-exposure evaluation and follow up, shall be made available at no cost to the employee, at a reasonable time and place, performed by or under the supervision of a licensed MD or other licensed healthcare professional.

   .2 If the employee initially declines the HBV vaccination but at a later date while still covered under this procedure decides to accept the vaccination, the City shall make available the HBV vaccination at that time.
.3 If a routine booster dose(s) of HBV vaccine is recommended at a future date, such booster shall be made available to the employee.

.4 Any other vaccinations that are not medically necessary or required by OSHA are the responsibility of the employee.

F. EXPOSURE DETERMINATION

1. The steps outlined below must be followed immediately after a suspected exposure incident since timing may be of the essence to the success of the post-exposure medical treatment. To determine if an exposure to a potential communicable disease has in fact occurred, the following three factors must all be present: (1) Infectious Agent (potentially infectious material/fluid), (2) Means of Transmission (transfer or contact with fluid or material) (3) Portal of Entry (broken skin or exposure to mucous membranes of host).

.1 In efforts to assist the exposed employee(s) in determining if an exposure has, in fact, occurred, the employee(s) should utilize the CPD Airborne and/or Bloodbourne Exposure Checklist which is a short questionnaire to determine whether or not the above chain of transmission is complete. The checklists are available on the CPD Network Location (PD_Resources(R:).

.2 All required exposure forms applicable to this departmental procedure in sections F, G & H, are located on the CPD Network ‘R’ Drive in the folder labeled, “Infection Control”.

2. If the incident does not constitute an exposure by definition as listed in F.1, then the employee should complete a CPD Body Fluid Incident Form (CP 168).

3. No adverse action is taken against an exposed employee if he/she refuses to submit to the procedures outlined herein, as the procedures are designed for the benefit of the employee.

4. All testing and diagnoses of both the employee and the source individual must be kept confidential in accordance with Federal, State and local regulations.

G. SOURCE COLLECTION PROCEDURES- HEALTH & SAFETY CODE 120260-120263

1. Once it is determined that a potential exposure has occurred as outlined in F.1, immediate medical treatment for the employee shall be made available as soon as practical.

.1 Initial medical treatment and evaluation shall occur at an Emergency Room and not an Occupational Medicine facility as non-Emergency Room facilities do not stock the required prophylactic medications typically utilized in communicable disease exposure treatment.

2. Any individual whose blood or other potentially infectious material is the source of a significant exposure, shall be tested, and the exposed individual(s) may be informed whether the source has tested positive or negative for communicable disease.

3. If the communicable disease status of the source is unknown, the blood sample required for testing may be collected from the source by informed consent, or court petition in the event of refusal.

.1 If communicable disease status is known or blood or other material samples are available for testing at medical facilities, disclosure and testing may be conducted pursuant to Health & Safety Code 120260-120263.
.2 A good faith effort to obtain the voluntary informed consent of the source patient or the authorized legal representative of the source patient to perform a test for a communicable disease, or actual consent itself, shall be in writing.

.01 Documentation of consent shall be complete by utilizing the following forms:

- CCC County Consent for HIV Test
- CCC County Authorization to Disclose Health Information

4. By law, an exposed individual shall be prohibited from attempting to obtain direct informed consent for testing for communicable diseases from the source patient.

5. If the source patient or the authorized legal representative of the source patient refuses to consent to test for a communicable disease after a documented effort has been made to obtain consent, the exposed employee shall complete the Court Petition Request Form pursuant to Health & Safety Code 121060, and convey it to the on-call Contra Costa County Judicial Officer for authorization.

6. To determine the appropriate process for blood sample collection from the source, the following should be considered:

.1 If the source is a suspect in custody and will not be transported to an emergency room, call the contracted phlebotomy agency for a blood draw once the suspect/arrestee has consented or a Court Petition Request has been authorized.

.2 If the source person is in custody and will be transported to an emergency room for medical clearance, advise medical staff of the suspected communicable disease exposure and request specimen collection by ER staff once the suspect has consented. Any blood specimen collected by hospital staff will not be released to CPD representatives. However, the hospital staff will report any positive test results to the exposed employee or CPD representative as authorized by law.

.01 If a blood specimen is required for evidentiary purposes, a separate specimen must be collected by the contracted phlebotomy agency and handled via chain of custody.

.3 When practical, any exposed employee(s) should utilize the same medical facility for treatment as the source subject and notify the emergency room staff that a communicable disease exposure has occurred.

7. If the source blood sample is collected by the contracted phlebotomy agency, it should be taken directly to the Contra Costa Public Health Laboratory. The Contra Costa Public Health Laboratory is closed on weekends, holidays and after 5:00 pm Monday through Friday.

.1 The Public Health Laboratory is located in the building directly behind the Contra Costa County Regional Medical Center Emergency Room, located at 2500 Alhambra Ave. in Martinez. The Public Health Laboratory is on the 2nd floor.

.2 Chain-of-custody must be maintained and documented on the front of the blood sample kit.

8. If the Contra Costa Public Health Laboratory is closed, then the blood sample kit shall be released into the custody of Contra Costa Clinical Laboratory (“In-patient” laboratory).
The Contra Costa Clinical Laboratory is also located in the building behind the Contra Costa County Regional Medical Center Emergency Room, located at 2500 Alhambra Ave. in Martinez. The Contra Costa Clinical Laboratory is on the 1st floor.

Chain-of-custody must be maintained and documented on the front of the blood sample kit.

H. POST EXPOSURE RESPONSIBILITIES & FOLLOW-UP

1. Exposed Employees Responsibilities

   .1 Immediately after exposure the employee shall, as appropriate:

   .01 Allow site to bleed freely.

   .02 Wash hands and contaminated area with soap and water or disinfectant.

   .03 Notify immediate supervisor.

   .04 Complete and print the following exposure forms which are located in the document file labeled “Infection Control” on the ‘R’ drive of any department computer:

   .001 Bloodborne Checklist or Airborne Checklist

   .002 CC County Exposure EMS 6

   .003 CC County Consent for HIV Test

   .004 CC County Disclosure Authorization

   .005 DWCI (State Worker’s Compensation)

   .006 DHS 8479 (CA State L.E. Potential HIV Exposure)

   .007 PER34 (City Employee Injury)

   .008 Employee Post-Exposure Follow-Up Checklist

2. Supervisor/Administrative Responsibilities

   .1 Assist exposed employee in completing exposure packet and facilitate immediate medical care.

   .2 Complete CPD Supervisor Checklist.

   .3 Complete PER 34.1 (Supervisor’s follow-up analysis of injury/illness)

   .4 FAX copy of EMS6 to CCC Public Health at (925) 313-6465. Confirm their receipt of the EMS6 form.

   .5 Notify Public Health immediately by phone at (925) 313-6740. If after hours, call (925) 646-2441 and ask for the on-duty Health Officer for notification.
.6 As soon as practical, but no later than the end of shift in which the exposure occurred, notification to Command Staff via text message shall be made by the on-duty Watch Commander. In the absence of a Watch Commander, this notification shall be made by the Supervisor in charge.

.7 Complete and submit the Supervisor Actions to Exposure Incident report, CPD form 16E.

3. Contra Costa Public Health Responsibilities

.1 It is the responsibility of the Contra Costa County Public Health Office to determine if the circumstances described in the report (EMS 6) constitute a possible exposure. Public Health will then complete the EMS 7 form and prescribe the necessary treatment and follow-up care if the emergency room staff did not initiate.

.2 If the Field Operations Command Office is notified by the County Public Health Department or a medical facility that department personnel may have been exposed to a communicable disease, he/she shall determine from a health officer, if any remedial action should be taken, and notify the personnel involved. A report of the exposure shall be completed, if not already documented.

.3 Any questions regarding decontamination or medical treatment should be referred to Public Health or the treating physician.

4. City of Concord Responsibilities

.1 Following a report of an exposure incident, the City shall make immediately available to the exposed employee a confidential medical evaluation and follow-up. The medical evaluation and follow-up shall include the following elements:

.01 Identification and documentation of the source individual, unless the City can establish that identification is impractical or prohibited by State or local law;

.001 The source individual’s blood shall be tested as soon as feasible and after consent is obtained in order to determine infectious diseases. If consent is not obtained, the City shall establish that legally required consent cannot be obtained. When the source individual’s consent is not required by law, the source individual’s blood, if available, shall be tested and the results documented.

.002 Drawing of blood- Only a physician, registered nurse, LVN, licensed medical technician or licensed phlebotomist may withdraw blood for the test and a licensed medical laboratory is required to perform the test.

.2 When the source individual is already known to be infected with HBV or HIV, testing for the source individual’s known HBV or HIV status need not be repeated.

.3 Results of the source individual’s testing shall be made available to the exposed employee, and the employee shall be informed of applicable laws and regulations concerning disclosure of the identify and infectious status of the source individual.

.4 Collection and testing of blood for HBV and HIV serological status;

.01 The exposed employee’s blood shall be collected as soon as practical and tested after the employee’s consent is obtained.
.02 If the employee consents to baseline blood collection, but does not give consent at that time for HIV testing, the sample shall be preserved for at least 90 days. If, within 90 days of the exposure incident, the employee elects to have the baseline sample tested, such testing shall be done as soon as practical.

.03 Additional collection and testing shall be made available as recommended by CCC Public Health.

5. Post–exposure prophylaxis (preventive medications), counseling, and follow-up appointments shall be completed as recommended.

I. INFORMATION AND TRAINING

1. All employees with the potential to occupational exposures shall participate in a training program at no cost to the employee.

2. The training shall contain the following:

   .1 An accessible copy of the regulatory text of this policy and an explanation of its contents;
   .2 A general explanation of the sign and symptoms of bloodborne diseases;
   .3 An explanation of the modes of transmission of bloodborne pathogens;
   .4 An explanation of the City of Concord exposure control plan and the means by which the employee can obtain a written copy;
   .5 An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials;
   .6 An explanation of the use and limitations of methods that will prevent or reduce exposure including appropriate engineering controls, work practices, and PPE;
   .7 Information on the types, proper use, location, removal, handling, decontamination and disposal of PPE;
   .8 Information on the HBV vaccination, including information on its efficacy, safety, method of administration, and the benefits of being vaccinated.
   .9 Information on the appropriate actions to take and persons to contact in an emergency involving blood/airborne or other potentially infectious materials;
   .10 An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available;
   .11 Information on the post-exposure evaluation and follow-up that the City of Concord is required to provide for the employee following an exposure incident;
   .12 An opportunity for interactive questions and answers with the person conducting the training session.

3. The person(s) conducting the training shall be certified and knowledgeable in the subject matter covered by the elements contained in the training program.
J. RECORD KEEPING

1. Medical Records
   .1 Accurate records shall be maintained for each employee with occupational exposure for the duration of employment plus thirty years.
   .2 The City of Concord shall insure that the employee’s medical records are kept confidential and are not disclosed or reported without the employee’s express written consent to any person within or outside the workplace except as required by law.
   .3 All employee medical records shall be kept separate from the employee’s personnel file.

2. Training Records
   .1 Training records shall be maintained and consistent with POST and the City of Concord Destruction Guide.